FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C 20549

FORM D

OMB Approval OMB Number:3235-0076

Expires: May 31, 2005
Estimated average burden
hours per response 1

NOTICE OF SALE OF SECURITIES	SEC USE	ONLY
PURSUANT TO REGULATION, D	Prefix	Serial
SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION	Date Re	ceived

Name of Offering (check	f this is an amendment and nar	me has changed, and	l indicate change.)	12:	09917
Sale of Limited Partnership Interests				1 20	~ / / /
Filing Under (Check box(es) that ap	ply)	☐ Rule 505		Section 4 (6	5) DULOE
Type of Filing New Filing	Amendment				
	A. BA	ASIC IDENTIFICA	ATION DATA		
1. Enter the information requested	about issuer				
Name of Issuer	s is an amendment and name ha	as changed, and indi	cate change.)	050	1881 1881 1881 1881 1881 1881 56933
Liberty Landing Marina Investors L.	<u>P</u>			,	
Address of Executive Offices (Numb	er and Street, City, State, Zip (Code)		Telephone Numb	per (Including Area Code)
1631 Locust Street, 2nd Floor, Philad	delphia, PA 19103			215-546-6595	
Address of Principal Business Opera	tions (Number and Street, City,	, State, Zip Code)		Telephone Numl	per (Including Area Code)
(if different from Executive Offices)					
Brief Description of Business				المحال	NUCESSEU
Ownership of marina and ferry opera	itions				JUN 1 3 2005 E
Type of Organization					THOMSON
☐ corporation	☐ limited partnership, alre	eady formed [other (please spe	cify):	FINANCIAL
business trust	limited partnership, to b	oe formed			
Actual or Estimated Date of Incorpor	ration or Organization:	Month 0 1	Year 0 5	¬	☐ Estimated
Jurisdiction of Incorporation or Orga	nization: (Enter two-letter U.S	S. Postal Service Ab	breviation for State:		
	CN for Canada; FN for other	er foreign jurisdictio	n D	Е	
CENEDAL INCTDUCTIONS				***	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes there the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control Number.



A. BASIC IDENTIFICATION DATA	
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 1 securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing 1 and Each general and managing partner of partnership issuers. 	partners of partnership issuers;
Check Box(es) that Apply:	irector
Full Name (Last name first, if individual) Heller Hickox Marina, LLC Purinase on Paridance Address (Number and Street, City, State, Zin Code)	3-3-3
Business or Residence Address (Number and Street, City, State, Zip Code) 1631 Locust Street, 2nd Floor, Philadelphia, PA 19103	
Check Box(es) that Apply:	irector General and/or Managing Partner
Full Name (Last name first, if individual) Heller, Douglas P.	9 8
Business or Residence Address (Number and Street, City, State, Zip Code)	
1631 Locust Street, 2nd Floor, Philadelphia, PA 19103 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	irector General and/or Managing Partner
Full Name (Last name first, if individual) Hickox, George K., Jr.	
Business or Residence Address (Number and Street, City, State, Zip Code) 1631 Locust Street, 2nd Floor, Philadelphia, PA 19103	
Check Box(es) that Apply:	irector General and/or Managing Partner
Full Name (Last name first, if individual) Taylor, Nathaniel A.	
Business or Residence Address (Number and Street, City, State, Zip Code) 1631 Locust Street, 2nd Floor, Philadelphia, PA 19103	
	irector General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:	irector General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:	irector General and/or Managing Partner
Full Name (Last name first, if individual)	<u> </u>
Business or Residence Address (Number and Street, City, State, Zip Code)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

General and/or

Managing Partner

Director

Promoter Beneficial Owner Executive Officer

Check Box(es) that Apply:

	-												
-				<u>F</u>	B. INFO	<u> PRMA</u>	TION A	ABOU	T OFF	ERING	}		
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							g? Yes □	No ⊠					
								N/A					
3. Does	the offeri	ing permi	it joint ov	vnership	of a sing	le unit?					Yes	No	
remuner person of than five	ration for or agent o	solicitati f a broke ons to be	on of pur or deale listed are	chasers i r register	n connec	tion wit the SEC	h sales of and/or w	securit	ies in the	offering. tes, list the	If a perso e name of	n to be list the broke	commission or similar sted is an associated or or dealer. If more n for that broker or
Full Na	ne (Last	name firs	st, if indiv	idual)									
Busines	s or Resid	dence Ad	ldress (Ni	ımber an	d Street,	City, St	ate, Zip C	Code)					
Name of	Associate	d Broker (or Dealer					<u>.</u>					
			sted Has ck indivi										All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA	[WV] [WI]	[WY]	[PR]	
Full Na	me (Last	name firs	st, if indiv	idual)									
Busines	s or Resid	dence Ad	dress (Nu	ımber an	d Street,	City, St	ate, Zip C	Code)					
Name of	Associate	d Broker o	or Dealer										
			sted Has										
[AL]	[AK]	[AZ]] [AR]	[CA	[CC)] [(CT] [I	DE]	[DC]	[FL]	[GA]	[HI]	 [ID]
[IL]	[IN]	[IA]	[KS]	[KY] [LA	[.	ME] [N	MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV] [NH	[NJ]	[NN	4] [N	(YV	NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	TX	ַ[U]	r] [V	/T] [\	VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ne (Last	name firs	st, if indiv	idual)							· · ·		
Busines	s or Resid	dence Ad	ldress (Nu	ımber an	d Street,	City, St	ate, Zip C	Code)	.,,,				
Name of	Associate	d Broker o	or Dealer	 ,		 							1,000
			sted Has eck indivi							,			All States
[AL]	[AK]							DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]		-				MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]			_				NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]				_	-	-	/A]	[WA]	[WV]	ſWIJ	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

or "zero". If the transaction is an exchange offering, check this box [] and in	dicate in the column below	the amounts of the securiti
offered for exchange and already exchanged.		
Type of Security .	Aggregate Offering Price	Amount Already Sold
Debt	\$	
Equity		\$ \$
[] Common [] Preferred	<u> </u>	
Convertible Securities (including warrants)	\$	\$
Partnership Interests		\$
Other (Specify - <u>Limited Partnership Interests</u>)	. \$ <u>3,757,000</u>	\$ 800,000
Total	\$ 3,757,000	\$ <u>800,000</u>
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have pur amounts of their purchases. For offerings under Rule 504, indicate the number dollar amount of their purchases on the total lines. Enter "0" if answer is "nor	r of persons who have pure	
		# 000 000
Accredited Investors		\$ <u>800,000</u>
		\$ <u>800,000</u> \$ 0
Non-accredited Investors.	0	\$ <u>0</u>
	0	
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE	ed for all securities sold by the	\$ 0 \$e issuer, to date, in offerings of by type listed in Part C-Question
Non-accredited Investors Total (for filings under Rule 504 only)	ed for all securities sold by the offering. Classify securities b	\$ 0 \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE	ed for all securities sold by the offering. Classify securities b	\$ 0 \$e issuer, to date, in offerings of by type listed in Part C-Question
Non-accredited Investors Total (for filings under Rule 504 only)	ed for all securities sold by the offering. Classify securities b	\$ 0 \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requeste types indicated, in the twelve (12) months prior to the first sale of securities in this Type of offering Rule 505 Regulation A	ed for all securities sold by the offering. Classify securities b	\$ 0 \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requestry types indicated, in the twelve (12) months prior to the first sale of securities in this Type of offering Rule 505 Regulation A Rule 504	ed for all securities sold by the offering. Classify securities b	\$ 0 \$ e issuer, to date, in offerings of by type listed in Part C-Question Dollar Amount Sold \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE	ed for all securities sold by the offering. Classify securities b	\$ 0 \$
Non-accredited Investors Total (for filings under Rule 504 only)	of for all securities sold by the offering. Classify securities by Type of Security	\$ 0 \$
Non-accredited Investors	of for all securities sold by the offering. Classify securities by Type of Security Type of Security on of the securities in this offering on the securities. If the amount of the securities in the securities	\$ 0 \$
Non-accredited Investors	of for all securities sold by the offering. Classify securities by Type of Security	\$ 0 \$
Non-accredited Investors	of for all securities sold by the offering. Classify securities by Type of Security Type of Security on of the securities in this offering contingencies. If the amount [x] \$_0	\$ 0 \$ e issuer, to date, in offerings of by type listed in Part C-Question Dollar Amount Sold \$ \$ \$ sering. Exclude amounts relating ant of an expenditure is not known.
Non-accredited Investors Total (for filings under Rule 504 only)	on of the securities in this offering contingencies. If the amount [x] \$\frac{0}{x}\$ \$\frac{0}{500}\$	\$ 0 \$
Non-accredited Investors	Type of Security on of the securities in this offer according ends of the amount of the securities. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities in this offer are contingencies. If the amount of the securities is a securities in this offer are contingencies. If the amount of the securities is a securities in this offer are contingencies. If the amount of the securities is a securities in this offer are contingencies. If the amount of the securities is a securities in this offer are contingencies. If the amount of the securities is a securities are contingencies. If the amount of the securities is a securities are contingencies. If the amount of the securities are contingencies are contingencies.	\$ 0 \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE	Type of Security on of the securities in this offering contingencies. If the amount [x] \$_0 [x] \$_500 [x] \$_20,000 [x] \$_0	\$ 0 \$

Total.....

[x] \$<u>20,500</u>

b. Enter the difference between the aggregate offering - Question I and total expenses furnished in response to difference is the "adjusted gross proceeds to the issuer."	Part C-Question 4.a. Th		3,736,500		
5. Indicate below the amount of the adjusted gross pro- the amount for any purpose is not known, furnish ar listed must equal the adjusted gross proceeds to the above.	estimate and check the b	ox to the le	ft of the estimate. The		
		Payment to)		
		Officers,			
		Directors &	&	-	ments To
		Affiliates		Oth	ers
Salaries and fees		[x] \$ <u>0</u>		[x]	\$0
Purchase of real estate				[x]:	
Purchase, rental or leasing and installation of n		[11] 40	=	(^)	r <u>~</u>
and equipment	· · · · · · · · · · · · · · · · · · ·	[x] \$0		[x]:	\$ <u>0</u>
Construction or leasing of plant buildings and	l facilities			[x]:	
Acquisition of other businesses (including the		. ,		. ,	
of securities involved in this offering that may	be used in				
exchange for the assets or securities of anothe	r issuer				
pursuant to a merger)				[x]	
Repayment of indebtedness					\$0
Working capital					\$ <u>0</u>
Other (specify): Redemption of Outstanding Limit	ted Partnership Interests	[x] \$ <u>0</u>		[x]:	\$3,736,500
		[] \$		[]:	\$
					\$
Column Totals		[x] \$ <u>0</u>		[x]	\$3,736,500
Total Payments Listed (column totals added)		()	x] \$ <u>3,736,500</u>		
D	. FEDERAL SIGNA	TURE			
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the irrequest of its staff, the information furnished by the issuer	ssuer to furnish to the U.S	S. Securities	and Exchange Com	ımissi	on, upon written
					_
Issuer (Print or Type)	Signature		Date		
Liberty Landing Marina Investors L.P.	Nathal A. Tal	~	5/31/05		4 to Value
Name of Signer (Print or Type)	Title of Signer (Print or	Type)			1
Nathaniel A. Taylor	Authorized Signatory of	the General	l Partner		
					=
	ATTENTION				
Intentional misstatements or on	nissions of fact constitu	te federal o	riminal violations	(Se	- 18
intentional inisstatements of on	U.S.C. 1001.)	ic reactar c	//////////////////////////////////////	. (50	

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252 (c), (d), (e) or (f) presently subject to any of the disqualification	YES	S NO)
provisions of such rule?	[]	ſΧ	7
See Appendix, Column 5, for state response.			•

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filing and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date		
Liberty Landing Marina Investors L.P.	Nathel I. Tark	5/31/05		
Name of Signer (Print or Type)	Title of Signer (Print or Type)	•		
Nathaniel A. Taylor	Authorized Signatory of the General Partner			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every not Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear type printed signatures.